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Television advertising's portrayal of women

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NOTE TO USERS

TELEVISION ADVERTISING'S PORTRAYAL OF WOMEN

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ABSTRACT

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The media, especially advertising, create rigid ideals of thinness, which have been proposed to cause mass dissatisfaction among the female population (Garner, Garfinkel, Schwartz, & Thompson, 1980). These ideals lead women to have negative attitudes toward eating, a preoccupation with weight and dieting, and a high prevalence of eating disorders (Tiggeman & Rothblum, 1988; Powell & Kahn, 1995).

This thesis addresses the topic of how a woman frequently compares her body with social stimuli and how exposure to these stringent, idealized body images limits a woman's satisfaction with her own body. An investigation comparing two groups of women, all between 18 and 24 years old, was carried out to discover the difference in self-esteem and eating disorder levels. The null hypothesis could not be rejected for these two cases. However, results illustrate that a significant difference did exist between the two groups regarding the mean level of media influence $t(11) = 2.06$, $p = .044$.

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CHAPTER I

Introduction

Statement of the Problem

Since the late 1960s, the portrayal of girls and women in mass media advertising has been of popular concern. Advertisements are carefully crafted bundles of images, frequently designed to associate the product with feelings of pleasure stemming from deep-seated fantasies and anxieties. They most often represent some ideal future self to the viewer in the process of selling a product that supposedly will aid the individual in attaining that future self (Craig, 1992).

Researchers and mental health clinicians have suggested that contemporary influences of the media may be associated with the development of self-esteem in adolescents (Polce-Lynch, Myers, Kliewer, & Kilmartin, 2001). Mass media are ubiquitously present in young people's lives via television, movies, magazines, and advertisements. This thought has led researchers to scrutinize how media advertisements foster unrealistic expectations regarding physical appearance, especially for women (Pipher, 1996).

Throughout childhood and adolescence, girls and women are bombarded with media images (Altabe & Thompson, 1993). An emphasis on physical appearance and body type is prevalent even in children's television commercials, and popular teen magazines heavily emphasize fashion, beauty, and stereotypical female roles (DeFleur & Everette, 1998).

U.S. advertising has created the so-called complete woman: a sex object who achieves fulfillment by looking beautiful and seductive to her boyfriends and lovers (Martin & Kennedy, 1994). Studies prove that many contemporary U.S. women covet an unrealistically thin body for themselves, a phenomenon that could be detrimental to their emotional and physical health (Silberstein, Striegel-Moore, Timko, & Rodin, 1988).

Global self-esteem, which refers to a person's general sense of worth or acceptance (Rosenberg, 1979), plays a critical role in mental health and psychopathology. Studies have shown that the media can have a negative psychological impact on women, including eating disorders (Hamilton & Waller, 1993) and body image problems (Henderson-King and Henderson-King, 1997).

Taken together, the findings of Garner, Garfinkel, Schwartz, & Thompson (1980) and Silverstein, Perdue,

Peterson, & Kelly (1986) show that from the turn of the century throughout the 1970s, the standard of physical attractiveness for women presented in the mass media became much thinner and less curvaceous. These findings were replicated in an update of the Garner et al. (1980) research. Using the same procedures employed in the Garner et al. study, Wiseman, Gray, Mosimann, & Ahrens (1992) found that during the period from 1979 to 1988, Miss America contestants continued to decrease in body size and *Playboy* models maintained their already low body sizes. As did previous researchers, Wiseman et al. also found that curvaceousness continued to decline among the Miss America contestants.

Media messages regarding what to wear or more invasively, what to weigh and how to sculpt the body, may relate to adolescent worries about physical appearance and self-evaluation (Craig, 1992). The emergence of the slender body type as a beauty standard for women is especially salient in mass media, and several researchers have demonstrated how the female body depicted in the media has become increasingly thin (Garner et al., 1980; Silverstein et al., 1986; Wiseman et al., 1992).

Purpose

The objectification theory developed by Fredrickson & Roberts (1997) and the stereotype theory put forth by Lippmann (1922) together form a compelling framework, proving that people have a drive to evaluate themselves that can be satisfied only by "social" comparisons with other people. With these theories as a framework, recent studies have found that females—preadolescents and adolescents—compare their physical attractiveness with that of models in advertisements (Richins, 1991).

A growing concern in our society is the plight of female preadolescents and adolescents who face many obstacles, including receiving less attention than boys in the classroom, unrealistic expectations of themselves regarding what they can and cannot do, decreasing self-esteem, and being judged on their physical appearance. In particular, girls are generally preoccupied with attempting to become beautiful (Martin & Kennedy, 1994). As Perry (1992) notes, today's specifications call for blonde and thin, which is an emotionally challenging task for a growing girl.

A majority of girls and women compare themselves with the female models appearing in advertisements and fashion

layouts (Belkaoui & Belkaoui, 1976). Individual differences and the motive for social comparisons of one's appearance with others are significantly correlated with various measures of negative body image.

Body dissatisfaction, which is especially prevalent during adolescence with a majority of girls reporting feeling overweight and expressing a desire to be thinner (Steiner-Adair, 1990), has been implicated in the development and maintenance of restricted eating, food preoccupation, binge eating, and bulimic tendencies (Thompson & Stice, 2001). In fact, one recent study of adolescents by Brumberg (1997) concluded that body dissatisfaction is the "single strongest predictor" of eating disorder symptoms.

Polce-Lynch, Kliewer, & Myers (1994) used a cross-sectional design to examine how contemporary social influences relate to adolescent self-esteem. The study showed that, in late childhood and early adolescence, girls reported more negative body image and media influence scores than did boys.

In Western societies, the mass media are typically regarded as the strongest transmitters of unrealistic beauty ideals (Martin & Kennedy, 1994). Given the prominent

role of television, as a mass medium, in socializing norms of physical attractiveness, it is reasonable to expect that portrayals of beauty on TV play a crucial role in shaping a woman's perception of and satisfactions with her body (Thompson & Stice, 2001). In particular, because TV advertisements that depict women as sex objects portray and reinforce contemporary standards of thinness, exposure to such stereotypic stimuli heightens a woman's concerns and dissatisfaction with her body (Myer & Biocca, 1992).

According to Pipher (1996), accepting one's physique is an essential feature of adolescent and young adult development. However, the pervasiveness of the thin ideal presented on television and other types of mass media may severely hinder women from accomplishing this developmental task. Rather than becoming more accepting of their bodies, women may become much more self-conscious and negative in the evaluations of their bodies (Furnham, Badmin, & Sneade, 2002)

In support of the hypothesis that young women would be more vulnerable to media images than girls, Botta (2003) found the mean effect of media images on body dissatisfaction was "somewhat greater" for women older than 19, compared with younger subjects. However, despite the

importance of age in body image formation, few studies included women from that age group as samples.

Furthermore, in most of the research focusing on adults, nearly all the studies (21 of 25) included in Botta's (2003) analysis used magazine photographs as experimental stimuli. Thus the impact of *televised* images of thinness has also been much less extensively investigated, which seems surprising given television's pervasive influence (Brumberg, 1997). Almost every Western household owns at least one television (Fouts & Burggraf, 1999), and children, adolescents, and adults all watch an average of more than 2 hours of television per day. In fact, during a single year, children and adolescents spend more time watching television than any other activity except sleeping (Lysonski & Pollay, 1990).

Additional research is needed that examines the role of the television as an agent of socialization for young women. The increasing pressure to be thin and the unrealistic images portrayed in the mass media may have a devastating effect on women's self-perceptions, self-esteem, and identity development.

Therefore, the aim of the present research is to examine the effect of *televised* images of female thinness

and attractiveness on young adult women (18 to 24 years old). It is predicted that women viewing commercials depicting the thin ideal (female ideal-body stereotype) will experience a greater state of body dissatisfaction than women shown commercials without this ideal-body stereotype.

Discussions focus on the cognitive, attitudinal, and behavioral consequences of exposure to stereotypical advertising. This study is done to benefit the women who might succumb to the belief that the ideal-body image that television advertising portrays is realistic.

CHAPTER II

Review of the Literature

A concern has developed regarding whether advertising reflects women's roles in reality or stresses stereotypical roles that no longer exist (Ferguson, Kreshel, & Tinkham, 1990). Most academic research shows that in advertising, women are portrayed in a limited and disparaging way, especially as objects (Belkaoui & Belkaoui 1976; Ferguson, et al., 1990; Lysonski & Pollay, 1990).

According to Hyman, Tansey, & Clark (1994), in body image advertising, attractive female bodies are used in a decorative fashion even if they do not relate to an intrinsic property of the product sold. A good example of a body image commercial is one with a slender model who—through fast cuts, pans, and tilts—remains largely faceless: an ideal (e.g., Mervyns' commercials).

In theory, the feminist notion that eating disorders are symptoms of the oppression of women is frequently acknowledged (Steiner-Adair, 1990). In practice, research on the development of bulimic eating behavior has focused primarily on studying adolescents and individual psychopathology. More than 90% of people with diagnosed eating disorders are women. Studies have shown that the

risk of developing this problem is also related to age. Bulimic eating disorders are particularly common among adolescent girls and young women from 15 to 24 years of age (Soundy, Lucas, Suman, & Melton, 1995).

This emergence of bulimia has been linked to a shift in Western standards of physical attractiveness toward increased thinness (Striegel-Moore, Silberstein, & Rodin, 1993). In our culture, physical attractiveness is more significant for females than for males. In a study by Steiner-Adair (1990), about 3 times as many girls as boys reported the desire to lose weight (62% vs. 23%) and attempted to lose weight (34% vs. 11%).

Recent studies have found that females do compare their physical attractiveness with that of models in advertisements (Richins, 1991). In turn, those comparisons may result in changes in self-perceptions of physical attractiveness (Richins) or self-perceptions of body image (Hamilton & Waller, 1993; Myer & Biocca, 1992). Given the importance of self-perceptions of physical attractiveness in influencing female self-esteem (Rosenberg, 1979), such comparisons may result in self-esteem change as well.

The objective of this literature review is to provide an overview of the existing literature on the sociocultural

perspective that mass media promulgate a slender body image, which promotes body dissatisfaction and encourages eating disorders.

Literature on the role-played by advertising and the theory that stereotypical images alter a woman's own body image are the foundation of this study. It looks at whether the attitudinal and behavioral effects detailed within this thesis do in fact manifest themselves in the mind of the female viewers.

Two primary research questions are posed:

1. Does viewing ideal-image advertising lead to lower levels of body image satisfaction in young adult women?
2. Are women who view ideal-image advertising more preoccupied with the desire to be thin, and more afraid of getting fat, than their peers who have not viewed these advertisements?

Two theoretical models are reviewed: the objectification theory and the stereotype theory. The literature review is divided into three main sections: the conceptual framework, the role that advertising plays in portraying the ideal-body image, and the effects of this portrayal on women. The effects section further explains

body dissatisfaction and eating disorders. The method section follows: it reviews theories and develops a framework for looking at the effects of ideal-body image on women. This section is followed by sections on the procedure, results, and conclusion of this study.

Conceptual Framework

The framework of the literature review is based on two theories. The first is the objectification theory developed by Fredrickson & Roberts (1997). The second is the stereotype theory put forth by Lippmann (1922), with a focus on the "pictures-in-your-head" aspect of this theory.

The blending of the two theories provides solid ground to help answer these research questions: Does viewing ideal-image advertising lead to lower levels of body image satisfaction in young adult women? Are women who view ideal-image advertising more preoccupied with the desire to be thin, and more afraid of getting fat, than their peers who have not viewed these advertisements?

Objectification Theory

Theorists from different disciplines have explored the multiple ways that the body conveys social meanings and how

these meanings shape gendered experiences (Bordo, 1993, and Foucault, 1980, in philosophy; Kaschak, 1992, and Ussher, 1989, in psychology). Fredrickson & Roberts (1997) noted that the psychology of gender was well positioned to push the analysis of bodies as social constructions even further. With this in mind, they proposed the objectification theory.

This theoretical framework places female bodies in a sociocultural context, with the aim of illuminating the lived experiences and mental health risks women face when they encounter sexual objectification. Although sexual objectification is but one form of gender oppression, it is one that factors into—and perhaps enables—a host of other oppressions women face from employment discrimination and sexual violence to the trivialization of women's work and accomplishments (Fredrickson & Roberts, 1997).

In the context of this study, the objectification theory is a framework for understanding the experience consequences of being female in a culture that sexually objectifies the female body. Fredrickson & Roberts (1997) using the objectification theory concluded that girls and women are typically acculturated to internalize an ideal-body image as a primary view of their physical selves. This

perspective of themselves can lead to habitual body monitoring, which, in turn, can increase women's opportunities for shame, and diminish awareness of their own internal body states. The accumulation of such experiences may help account for an array of mental health risks that disproportionately affect women, including unipolar depression, sexual dysfunction, and eating disorders (Laessle, Kittl, Fichter, & Pirke, 1988).

At a psychological level, perhaps the most profound effect of sexual objectification is that it coaxes girls and women to adopt a peculiar view of the self. This personal effect of the ideal-body image is illustrated by the number and rigor of diets that most women put themselves through (Garner & Garfinkel, 1982). According to these researchers, weight loss becomes a sign of mastery, control, and virtue. They noted that the pressure on women to be thin and to achieve might partially explain why anorexia nervosa has increased so dramatically. Patients with anorexia nervosa respond to these pressures by equating weight control with self-control, and this, in turn, is equated with beauty and success.

The objectification theory represents an attempt to push further a sociocultural analysis of the female body

within the psychology of women and gender. It provides a particular framework for organizing and understanding an array of experiences that appear to be exclusively female (Fredrickson and Roberts, 1997).

Stereotype Theory

The crux of the stereotype, or "pictures in our heads," theory comes from Lippmann (1922):

> In the great blooming, buzzing confusion of the outer world we pick out what our culture has already defined for us, and we tend to perceive that which we have picked out in the form of stereotype is indeed our culture. (p. 55)

Certainly the most often quoted phrase from *Public Opinion* (1922) is "pictures in our heads." Lippmann's basic thesis was that humans do not respond directly to external reality but to a "representation of the environment which is in lesser or greater degree made by man himself" (p. 10). He called this pseudoenvironment or fiction.

According to Hamilton (1981), Lippmann used the term *stereotype* very much as contemporary cognitive psychologists use the term *schema*. Although a variety of definitions have been proposed, most researchers would probably agree that a schema is a cognitive structure that influences all perceptual-cognitive activities. Hamilton

noted that stereotypes were cognitive structures that helped individual process information from environmental images.

Lippmann (1922) noted that the hallmark of a perfect stereotype is that it precedes the use of reason. He argued that it is a form of perception, imposing a certain character on the data processed by a human sense, before the data reaches the intelligence.

In relation to this study, the application of the stereotype theory, done by DeFleur & Everette (1998), can be split into a five-step process:

1. In the entertainment content and other messages, the media repeatedly present portrayals of ideal-body images for women (advertisements, beauty contests, and so on).
2. Such portrayals are similar among various media (movies, television, radio, and print), and this provides corroboration of their nature.
3. These portrayals provide constructions of meaning for the audience.
4. Therefore, members of the audience incorporate those meanings into their memories as relatively inflexible schemata (stereotypic interpretations).

5. A woman then uses these images when thinking about or responding to her image of herself.

Women act upon the ideal-body image as if it were real (Hamilton, 1981). Hamilton noted that the mass media, specifically through stereotypical ideal-body advertising and programming, play an indirect role in the promotion of body image distortion. In adolescence, when a young woman is developing a sense of her mature self, she may be highly sensitive to social cues (Myer & Biocca, 1992). This narcissism is not limited to young females. A multimillion-dollar industry that is devoted to adult beauty enhancement is proof of the perpetuation of the narcissism that begins with puberty.

The Role of Advertising

For generations, advertising has been an important part of the fabric of life in the United States (Lysonski & Pollay, 1990). There is overwhelming evidence that advertisements present traditional, limited, and often demeaning stereotypes of women (Courtney & Whipple, 1983). Stereotyping in advertising can serve a useful function by conveying an image quickly and clearly: there is nothing inherently wrong with using characterizations of roles that

are easily identifiable. However, Courtney & Whipple asserted that the pervasive use of traditional, limited, and demeaning stereotypes might result in undesirable social consequences.

Most researchers express great concern about the images advertisers provide and the beliefs that they promote (Belkaoui & Belkaoui, 1976; Foucault, 1980). Posavac and her colleagues (1998) found that the average woman sees 400 to 600 advertisements per day, and by the time she is 17 years old, she has received more than 250,000 commercial messages through the media. Only 9% of commercials have a direct statement about beauty, but many more implicitly emphasize the importance of beauty—particularly those that target women and girls. A study by Grogan, Williams, & Connor (1996) found that 50% of advertisements in teen girl magazines and 56% of television commercials aimed at female viewers used beauty as product appeal. This constant exposure to beauty-oriented advertisements may influence girls to become self-conscious about their bodies and to obsess over their physical appearance as a measure of their worth.

Creedon (1989) noted that critics and commentators from every discipline have grappled with the potential of

advertising to influence minds. She further noted that in today's world, advertising has become the chief influencer in coaxing people to change their habitats.

In the United States culture the audience is continually exposed to images of idealized female bodies (Kilbourne, 1999). These idealized images are almost invariably of youth, slimness, and whiteness. Brumberg (1997) pointed out that a thin ideal-body image is conveyed and reinforced by many social influences, including family, peers, schools, sports teams, business, and health care professionals. However, the loudest and most aggressive transmitters of images and narratives of ideal slender beauty are the mass media.

The mass media use a variety of technologies, ranging from billboards to radio, but current theories and studies emphasize visual media, such as magazines and television. Targeting markets to sell products such as diets, cosmetics, and exercise gear, the media construct a daydream of hopes and high standards that incorporate the glorification of slenderness and weight loss (Kilbourne, 1999).

And Kilbourne (1999) further noted that advertising often turns people into objects. Various parts of the

female body are packaged and used to sell everything from trucks (Toyota Tacoma commercials) to chewing gum (Trident White commercials). Spender (1982) painted the following portrait of the "advertised" American Woman:

> She is athletic, but never sweats. She is beautiful, but wears no makeup. She is working, but never tired. Aging, but never wrinkled. Breathtaking, but brainless. Intelligent, but humorless. She is everything. She is nothing. She is advertising to women. (p. 4)

Kilbourne (1999) asserted that many people do not fully realize the terrible consequences when people become things. Self-image is deeply affected. Girl's self-esteem plummets when they reach adolescence. This, according to Kilbourne, is partly because they cannot possibly escape the message that their bodies are objects, and imperfect objects at that.

The emergence of the slender body type as a beauty standard for women is especially salient in the mass media, and researchers have demonstrated how the female body depicted in the media has become increasingly thin (Garner & Garfinkel, 1982). Assessing the height, weight, and body measurements of *Playboy* centerfolds and of Miss America Pageant contestants from 1960 to 1979, Garner et al. (1980) noted that the average weight of the models declined

significantly. For example, in 1960, the average weight of *Playboy* models was 91% of the population mean. By 1978, the mean weight of the models had dropped to 84% of the population mean. A similar trend was apparent among the Miss America Pageant contestants. Prior to 1970, the mean weight of the contestants was approximately 88% of the population norm. Following 1970, the mean weight of the contestants decreased to 85% of the population norm.

Given this message aimed at women through the mass media, it is not surprising that many U.S. women wish to be thin and typically feel dissatisfied with their bodies (Altabe & Thompson, 1993). Advertisements emphasize thinness as a standard for female beauty, and the bodies idealized in the media do not look like the bodies of most healthy women. In fact, today's fashion models weigh 23% less than the average girl or woman, and a woman between the ages of 18 and 34 has a 7% chance of being as slim as a catwalk model and a 1% chance of being as thin as a supermodel (Martin & Kennedy, 1994). However, 69% of girls in a study conducted by Ferguson et al. (1990) said that magazine models influenced their idea of the perfect body shape. The pervasive acceptance of this unrealistic body type creates an impractical standard for most women.

Gazing at the flashy images of so-called perfect female beauty promoted ubiquitously in magazines and television, a girl may infer early on that her body is her most important attribute and begin a lifelong project of attempting to perfect it (Brumberg, 1997). The perfect body is said to have flawless skin, a slender waist, long legs, and well-developed breasts (Thompson, Heinberg, Altabe, & Tanteleff, 1999).

Both beauty and morality have come to be equated with slenderness, so a woman who is beautiful both inside and outside is thin: in control of her desires (Rodin, Brownell, & Wilmore, 1992).

Researchers do not assert that in every sphere the media should faithfully represent reality. On the contrary, it is generally accepted that in many ways the media deal with fantasy, and that this fantasy is recognized as such by the public (Lysonski & Pollay, 1990).

But most researchers do share a concern that the mass media are a cultural force and thus, subtly and indirectly, shape social reality. Stereotype theory proposes that social attitudes and behaviors are learned through a complex process of imitation and comparison with the attitudes and images presented by the mass media (DeFleur &

Everette, 1998). In a survey by *Teen People* magazine, 27% of the girls said that the media pressured them to have a perfect body, and a poll conducted by the international ad agency Saatchi and Saatchi, in 1994, found that ads made women fear being unattractive or old (Thompson & Stice, 2001).

Indeed, it is difficult to find media depictions of female beauty that differ from this Western European ideal. Broad dispersion of this idealized image of the female body has all but universalized it.

The Objectifying Image

Objectifying images, as pointed out by Rudman and Verdi (1993), have consistent patterns of sexual exploitation of the female body, regardless of the medium. In general, female models are placed in sexually compromising positions and sexually submissive postures, and their facial expressions connote sexuality.

Alternatively, an advertisement may concentrate on female body parts, rather than the model's facial expressions to sell a product. Or the model's face may display no emotion, no personality (Brumberg, 1997).

Research done by Silverstein et al. (1986) demonstrated that advertising promotes more than mere products in our popular culture. Images used in advertising are idealized. Eventually they come to set the standard, which we, in turn, feel we must live up to. Advertisements show us the ideal and then tell us how to obtain it (Spillman & Everington, 1989).

Advertisers have the power to promote positive images or negative images (Silverstein et al., 1986). Unfortunately, most of the roles portrayed by women tend to fit the latter description. More than 50% of commercials portraying women contained at least one camera shot focusing on her chest (Hyman et al., 1994). Many enjoy these images; many women try to embody them, regardless of how much they degrade themselves.

Perry (1992) researched a successful and controversial ad campaign for Axe deodorant body spray for men (Perry, 1992). Perry pointed out that, in contrast with the usual advertisements that focused on body parts or used expressionless models, these ads focused on models expressions. Ironically, female models looked even more vulnerable than usual, because they were depicted as

submissive creatures. The models used in this advertising campaign possessed the idealized body type (Perry)

Advertisers often emphasize sexuality and the importance of physical attractiveness in an attempt to sell products (Richins, 1991). The body type of the female models used in the Axe commercials is an unrealistic ideal for most women.

Some researchers believe that advertisers purposely attempt to normalize unrealistically thin bodies, in order to create an unattainable desire that can drive product consumption (Hyman et al., 1994). The media, it is said, market desire by producing ideals that are almost comically different from what real bodies look like. The media create a market for frustration and disappointment (Downs & Harrison, 1985). Considering that the diet industry alone generates $33 billion in revenue, it can be said that advertisers have been successful with their marketing strategy (Belkaoui & Belkaoui, 1976).

This distorted ideal-body image is one of the leading causes for the recent rise of anorexia in girls. The waif image caused extremely low self-esteem for women in the 1990s (Irving, 1990). The Axe campaign was effective

because the average woman can never look like the models portrayed in these advertisements (Perry, 1992).

The Effects

The average person in the United States is exposed to at least 5000 advertisements every year and spends 3 years of his or her life watching television commercials (Kilbourne, 1999). Kilbourne further noted that advertisements make up about 70% of our newspapers and 40% of our mail. In magazines, on television, and in movies, women see models who are increasingly, and, as role models for most women, unrealistically slender (Archer, Iritani, Kimes, Barrios, 1983). Even though women may not directly pay attention to these kinds of media messages, they are powerfully influenced, mostly on an unconscious level.

In a 1992 study (Rodin et al., 1992), adolescent girls described the ideal girl as 5 feet 7 inches tall, 100 pounds, and a size 5, with long blonde hair and blue eyes. Rodin et al. asserted that the internalization of such a stringent and essentially unattainable ideal of beauty leads to body dissatisfaction, which results in low self-esteem and eating disorders.

Body Dissatisfaction

Body image is a complex construct, especially in a society where girls are encouraged to be intensely aware of, and define their identity through appearance (Thompson & Stice, 2001). Western culture has changed its image of feminine beauty. Whereas once plump was considered beautiful, now a slender physique is considered ideal. With this increasingly thinner ideal, it is not surprising that women's dissatisfaction with their bodies and eating disorders have increased considerably (Irving, 1990).

When a woman looks at a picture of another woman, two processes might occur. One is identification. By identifying with a slim woman in a picture, a reader might achieve at least a brief moment of pleasure as she imagines that she, too, could be as slim and attractive as the model. The other process is social comparison (Brumberg, 1997). A woman looking at a model in a picture might consider how she compares with the model (Brenner & Cunningham, 1992); this is likely to be a disheartening comparison.

The negative impact of media depictions of slenderness seems to then depend on the occurrence of social comparison (Archer et al., 1983). Sociological research suggests that

advertising and programming that emphasize the pursuit of the ideal-body has an effect on young women's perceptions of their own bodies. A number of studies have, in fact, demonstrated that when adolescents are shown either still photographs or TV commercials with super-slender models they report shifts toward negative moods (Altabe & Thompson, 1993; Furnham et al., 2002) and an increase in various measures of dissatisfaction with their bodies (Hyman et al., 1994).

During late childhood and early adolescence, when social comparisons play a more significant role in self-perception, girls who do not have the idealized body shape agonize about their bodies (Brumberg, 1997). Body image distortion may occur because of the psychological pressure that results from the contrast between the internalized ideal-body and the objective body. As her internalized ideal gets further away from her objective body shape, the individual may experience a self-loathing that exaggerates the perceived deformity of this objectified body shape (Laessle et al., 1988).

Even women who are within or slightly below the normal weight range for their height often perceive themselves as overweight and are dissatisfied with their bodies. Body

image dissatisfaction is a crucial area of investigation because of its relationship with low self-esteem (Polce-Lynch et al., 2001) and depression (Seid, 1989).

In a 1985 study (Downs and Harrison, 1985), it was found that, on average, 1 out of every 3.8 commercials involves some form of ideal-body messaging. Based on this frequency and average viewing habits, they estimated that children and adult viewers were exposed to 5,260 ideal-body messages per year, an average of more than 14 messages per day. Of these, 1,850 dealt directly with beauty. Although the researchers found that food and drink commercials had the greatest share of body and weight messages, they pointed out that stereotypes about what is considered bodily attractive have permeated virtually the entire television advertising market, making television commercials powerful sources of the ideal-body stereotype.

Female social outcomes depend critically on their attractiveness (Bordo, 1993), and accordingly, a perceived discrepancy is likely to be quite threatening, perhaps leading to increased concern with body weight. According to the Objectifying Theory, because females are socialized to see themselves as objects to be looked at and evaluated, they are more likely to feel shame and anxiety for not

appearing perfect (Fredrickson & Roberts, 1997). Martin & Kennedy (1994) noted that the body project to reduce the discrepancy between actual body size and ideal-body image results in an unstable self-perceived body image that is responsive to social cues.

On a daily basis, the media presents woman with a barrage of images depicting and glamorizing thin women. The media are seemingly obsessed with the idea that thin equals beautiful. It is therefore easy to understand why the media have been directly blamed for initiating eating disorders (Hyman et al., 1994).

Eating Disorders

What is the average young woman's perception of her body? When the average young woman looks in the mirror, she sees a fat person (Wylie, 1979). In a society where the idealized body is becoming ever thinner, women in general have been found to overestimate the sizes of their bodies (Garner & Garfinkel, 1979).

Studies show that adolescent girls and college women are most affected by a poor body image and are therefore most likely to be the ones who diet to manipulate their size and shape (Grogan et al., 1996). However, due to

genetics and the physiology of weight regulation, only a small percentage of them can actually mold their bodies into the idealized slender shape (Rodin et al., 1992).

Evidence that perceptions of their own bodies may be affected by media portrayals of women has been provided by Irving (1990), who investigated the impact of exposure to slides of thin, average, and large models on the self-evaluations of 162 college women exhibiting varying levels of self-reported bulimic symptoms. Irving found that exposure to thin models was related to lower self-evaluations, regardless of the level of bulimic symptoms. Moreover, women were more likely to have eating disorders when other issues accompanied their body dissatisfaction, most particularly, a tendency to obsessively examine their bodies and think about how they appeared to others.

Most eating disorder experts contend that there is far more to an eating disorder than a simple desire to imitate images of emaciated models (Szmukler, 1985). However, there is little doubt that the media are responsible for putting pressure on women who already feel vulnerable. To support this idea, eating disorder counselors cite the fact that women constantly say they feel inadequate because of their

inability to lose weight and therefore look beautiful (Striegel-Moore et al., 1993).

Eating disorders are generally believed to be the result of unresolved psychological issues. The sufferer usually discovers that losing weight, either through extreme dieting or binge eating followed by vomiting or the use of laxatives, establishes a form of control unavailable in any other area of their life (Szmukler, 1985).

Wiseman et al. (1992) noted that according to the *DSM III-R*, maintaining body weight of 15% less than normal weight is a criterion for anorexia nervosa. Once an eating disorder takes root, body image becomes distorted, and the individual (usually female) begins to feel that she can never be thin enough.

Other researchers have also found the prevalence of disordered eating among fashion models and the severe health risks associated with achieving a very thin body type (Brenner & Cunningham, 1992). Women whose body fat falls to less than 22% are much more susceptible to infertility, amenorrhea, ovarian and endometrial cancer, and osteoporosis (Seid, 1989). These findings suggest that the slim beauty ideal presented in the media may be unhealthy for women.

In a survey of 232 female undergraduate students at a large Midwestern university, Downs and Harrison (1985) found that about 15% of the women met the criteria for disordered eating: signs of anorexia or bulimia, body dissatisfaction, a drive for thinness, perfectionism, and a sense of personal ineffectiveness. The study was particularly significant because it showed that reading magazines and watching television, especially those magazines and TV shows that depicted and promoted thinness, significantly predicted symptoms of women's eating disorders.

Irving (1990) further noted that eating disorders were perhaps the most obvious risks posed to the well-being of women. In a culture that objectifies the female body, problems are literally—and sometimes visibly—enacted on the body.

The apparent increase in eating pathology in the past several decades coincided with a decrease in the weight of the ideal-body for women portrayed in the media. The bust-to-waist ratio for female actors and models in women's magazines has decreased steadily in the past three decades (Spillman & Everington, 1989).

It has been further noted that even women who can be classified as being within, or slightly below, the normal weight range for their height often perceive themselves as overweight and are dissatisfied with their bodies (Kaschak, 1992).

Weight loss, in an attempt to achieve the ideal-body image, is more than inches and pounds to a woman with an eating disorder: it is a way of life (Myer & Biocca, 1992). Further, Myer & Biocca pointed out that starvation, binge eating, and purging were intensely emotional experiences. A perfectionist and overachiever, the anorexic or bulimic works relentlessly toward a thinner body that promises beauty, success, and happiness. The researchers theorized that the harder an anorexic or bulimic works to lose weight, the further away she gets from her promise. This obsession with the pursuit of a thinner and thinner ideal body can, in extreme cases, lead to death.

The Twist

Interestingly enough, the impact of viewing ideal images may not be consistently negative (Brown, Novick, Loard, & Richards, 1992; Henderson-king & Henderson-king, 1997). For example, Craig (1992) noted that viewing ideal-

body images did not negatively affect some women's satisfaction with their own physical attractiveness.

Women read and view magazines and television in the hope that something that they see or read will help them lose weight and reduce their self-dissatisfaction. However, at the same time it was noted that viewing ideal images led to less body-size overestimation and more positive moods in some women (Myer and Biocca, 1992). Brown et al. (1992) further mentioned that individual differences in body weight moderate a woman's vulnerability to the negative impact of media images.

Whether a woman feels better or worse after viewing a slender model is clearly a function of the degree to which her sense of self is rooted in her personal properties and bodily activities (Fredrickson and Roberts, 1997).

Bem (1972) noted that the fact that not all women are equally affected by media exposure shows that women who are consistently satisfied with their own body shape may not find exposure to media images threatening.

Experiments done by Posavac et al. (1998) show that exposure to media images does often result in increased weight concern among women, but that body dissatisfaction—a stable personality characteristic—is a moderator of

vulnerability to this effect. The ethnicity of the participants in this study reflected that of the local population; more than 90% were white. The nonwhite participants primarily belonged to one of the following groups: Asian, Pacific Islander, or Latino.

But not all women in the study done by Posavac et al. (1998) were susceptible to the ideal-body image. Women who were initially very satisfied with their bodies did not report more concern with weight following exposure to media images. Initially satisfied participants may have been immune to the manipulation for two reasons. First, a woman may have low body dissatisfaction because her body shape is similar to that of the standard depicted in the media. Accordingly, such a participant would not have been likely to perceive discrepancy between her own body and that of the models. A second possibility theorized by Posavac et al. is that even if a woman is substantially heavier than the media standard, she may possess low body dissatisfaction because body image issues are not important to her; she may, for example, be confident in her skills and abilities in other arenas. A female with low body dissatisfaction for either reason would not likely be

threatened by exposure to media images, and increased weight concern would be unlikely.

A study by Wilcox and Laird (2000) found that among women whose emotions were based on personal cues, looking at slender models produced lower self-esteem and less satisfaction with their weight, as compared with women viewing more robust models. Among women unresponsive to personal cues, looking at slender models increased self-esteem and satisfaction with their weight, apparently due to identification with the models.

Proposed Study

The purpose of this study is to try to answer the following questions:

1. Does viewing ideal-image advertising lead to lower levels of body image satisfaction in young adult women?
2. Are women who view ideal-image advertising more preoccupied with the desire to be thin, and more afraid of getting fat, than their peers who have not viewed these advertisements?

These questions will elicit data that test the hypotheses discussed in the next section.

Hypothesis

The thesis will test the following hypotheses:

H_1: Women who view thin-image advertising will have a reduced sense of self-esteem compared with counterparts who have watched commercials without ideal-body stereotypes.

H_2: Thin-image advertising will result in a heightened preoccupation with thinness and anorexic/bulimic attitudes for the experimental group, as compared with the control group.

In an attempt to answer these hypotheses, a quantitative study will be used with the help of experiments as a method.

CHAPTER III

Method

Selection of Research Approach

A research method is a strategy of inquiry that moves from underlying philosophical assumptions to research design to data collection (Babbie, 1998). The choice of research method influences the way in which the researcher collects data. Different research methods imply different skills, assumptions, and research practices. Babbie has demonstrated that experimentation is especially appropriate for hypothesis testing.

Why Experiments?

Babbie (1998) noted that the experiment is the principal research method with which researchers can specify-cause-and effect relationships. It differs from non experimental methods in that it involves the deliberate manipulation of one variable while trying to keep all other variables constant. This property makes the experiment a powerful tool in investigating issues.

The intention of an experiment is to produce a good control. By random assignment of subjects between experimental and control groups, virtually all-confounding

elements are eliminated; any final difference between these groups can be associated with treatment. Babbie (1998) theorizes that experiments lend themselves to a logical austerity that is often much more difficult to achieve through other methods of research.

Studying the Body Image

A young woman's perception of her body can be significantly altered after watching just 30 minutes of televised depictions of the ideal female form (Myer & Biocca, 1992). If the mental constructs of a woman's body image are responsive to cues, television appears to be a significant carrier of those cues. That said, Myer and Biocca noted that it is important to take into account that a young woman's body image emerges from various social cues and from self-observation over time.

Samples

This study involved a total group of 60 subjects. Having recruited the total group of subjects, the experimenter randomly assigned those subjects to two defined groups: the experimental group ($n_1 = 30$) or the control group ($n_2 = 30$).

Aside from the question of generalizability, the cardinal rule of subject selection and experimentation concerns the comparability of the experimental group and the control group (Martin & Kennedy, 1994). It is essential that the two groups be as similar as possible. For this reason, subjects were defined as female university students aged 18 to 24 years. They were selected from two undergraduate classes in the School of Journalism and Mass Communication at San Jose State University. Although the sample is not representative of all adolescent girls and young women in the United States, these particular subjects were selected because they do represent a segment of females most susceptible to problems linked to physical attractiveness, such as low self-esteem and eating disorders (Szmukler, 1985).

Advertising Stimuli

For the purpose of this study, the focus was on both representative and most-viewed commercials. There seemed to be no way to take a random sample of commercials, so it was decided to choose programs based on the Nielsen program ratings, and then make the assumption that the commercials viewed as part of these programs would also meet the

requirements of being representative and of being commercials that most people watch.

As the concern of the study had to do with popularity as well as representation, ratings were obtained to determine which were the most popular programs. The Nielsen Company provided ratings (Table 1) for the top 19 evening shows for the week ending April 21, 2004 (Nielsen Media Research, 2004). These were the most recent ratings available to the public at that time.

The prime time ratings compiled by the Nielsen Media Research group are the percentage of the nation's estimated 105.5 million TV homes. Each rating point represents 1,055,000 households. A share is the percentage of television sets in use turned to a specific program. The ratings data are copyright 2004 and were obtained from the Nielsen Media Research, Inc.

Table 1

Top TV Shows, April 14-21, 2004

1.	*CSI: Crime Scene Investigations* Network: CBS Day: Thursday	Rating: 14.8 Household Share: 22 Household Audience: 16,003,000 Viewers: 23,791,000

2.	*American Idol* Network: FOX Day: Wednesday	Rating: 13.9 Household Share: 23 Household Audience: 15,041,000 Viewers: 23,100,000
3.	*Survivor: All-Stars* Network: FOX Day: Wednesday	Rating: 11.6 Household Share: 19 Household Audience: 12,600,000 Viewers: 20,419,000
4.	*Without a Trace* Network: CBS Day: Thursday	Rating: 11.2 Household Share: 18 Household Audience: 12,193,000 Viewers: 17,133,00
5.	*Friends* Network: NBC Day: Thursday	Rating: 11.0 Household Share: 18 Household Audience: 11,973,000 Viewers: 16,840,000
6.	*Law and Order* Network: NBC Day: Wednesday	Rating: 10.6 Household Share: 18 Household Audience: 11,529,000 Viewers: 16,161,000
7.	*American Idol* Network: FOX Day: Thursday	Rating: 9.4 Household Share: 16 Household Audience: 10,168,000 Viewers: 15,326,000
8.	*Law and Order: Criminal Intent* Network: NBC Day: Tuesday	Rating: 9.1 Household Share: 14 Household Audience: 9,834,000 Viewers: 14,251,000

9. *CSI: Miami* *Network: NBC* Day: Tuesday	Rating: 9.1 Household Share: 14 Household Audience: 9,633,000 Viewers: 13,239,000
10. *Crossing Jordan* Network: CBS Day: Monday	Rating: 8.8 Household Share: 14 Household Audience: 9,548,000 Viewers: 13,309,000
11. *Friends* (Rerun) Network: NBC Day: Thursday	Rating: 8.6 Household Share: 15 Household Audience: 9,371,000 Viewers: 13,494,000
12. *Fear Factor* Network: NBC Day: Monday	Rating: 8.6 Household Share: 14 Household Audience: 9,366,000 Viewers: 14,657,000
13. *Cold Case* Network: CBS Day: Sunday	Rating: 8.3 Household Share: 14 Household Audience: 9,073,000 Viewers: 12,928,000
14. *Miss USA* Network: NBC Day: Monday	Rating: 8.2 Household Share: 13 Household Audience: 8,934,000 Viewers: 13,098,000
15. *Law and Order: Special Victims Unit* Network: NBC Day: Tuesday	Rating: 7.6 Household Share: 13 Household Audience: 8,286,000 Viewers: 11,243,000

16. *60 Minutes* Network: NBC Day: Monday	Rating: 7.4 Household Share: 14 Household Audience: 8,046,000 Viewers: 11,152,000
17. *Two and a Half Men* Network: CBS Day: Monday	Rating: 7.3 Household Share: 11 Household Audience: 7,951,000 Viewers: 11,250,000
18. *Two and a Half Men* (Rerun) Network: CBS Day: Monday	Rating: 7.3 Household Share: 11 Household Audience: 7,870,000 Viewers: 11,100,000
19. *Dateline Special* Network: NBC Day: Wednesday	Rating: 7.3 Household Share: 11 Household Audience: 7,894,000 Viewers: 10,372,000

Variables

Using the experimental design, subjects were measured in terms of independent variables and dependent variables. When an experiment is conducted, the experimenter manipulates some variables and others are measured from the subjects. The former variables are called independent variables or independent factors; the latter variables are called dependent variables or dependent measures.

Independent Variables: The Tapes

Television commercials totaling 3 hours in length were taped throughout a 2 week period. Two tapes, with approximately 14.5 minutes of material on each tape, were compiled. The material included advertisements that appeared during prime-time programming. Tape A (viewed by n_1) had advertisements with examples of female ideal-body stereotyping (e.g., a Lee jeans commercial). Tape B (viewed by n_2) had advertisements without examples of female ideal-body stereotyping (e.g., a Comcast commercial).

To ensure that the subjects in the experimental group (n_1) perceived the models in the ads (tape A) as highly attractive, means measuring the models' perceived attractiveness were calculated (Martin & Kennedy, 1994). On a 7-point semantic differential scale, used in a Martin & Kennedy study to find the effects of beautiful models on females, subjects in the experimental group (n_1) were asked to rate the models in the commercials (tape A)—ugly, very overweight and out of shape, fat, in shape, very fit, thin and very unattractive, or very attractive and beautiful—prior to measurement of the dependent variables. The range of mean responses to those items was from 5.1 to 6.4, far

more than the midpoint value of four. Hence, it could be established that the subjects perceived the models as extremely attractive.

Dependent Variables: The Scales

The Rosenberg Self-Esteem Inventory (RSI), a global self-esteem measure, was chosen because it is a generally accepted, well-validated, and reliable measure for use with adolescents and young adults (Petersen, Schulenberg, Abramowitz, Offer, & Jarcho, 1984). In a study done by Polce-Lynch et al. (2001), RSI was used to find the relationship of adolescent self-esteem to body image, media influence, and emotional expression. The results showed that body image appeared to mediate the relationships between certain predictors and self-esteem for girls, while gender and grade appeared to moderate the relationship between media influence and self-esteem for both girls and boys.

The RSI is a 10-item questionnaire that possesses satisfactory internal consistency (*M* a ¼ .82), test-retest reliability (*M* r ¼ .86), and convergent validity with self-esteem assessed by structured interviews, observer ratings, clinician ratings, and peer ratings (Rosenberg, 1979). The

scale requires Likert-type responses to 5 questions that indicate high self-esteem and 5 questions that indicate low self-esteem. A sample item from the RSI is, "I feel that I have a number of good qualities." The response format is strongly agree, agree, disagree, or strongly disagree. Previous internal consistency reliability has been reported at .89 (Moran and Eckenrode, 1991). The RSI is scored by summing the ratings assigned to all the items after reverse scoring the positively worded items. Scores range from 10 to 40, with higher scores indicating higher self-esteem.

Garner & Garfinkel (1982) designed a psychological measure for anorexic and bulimic attitudes and beliefs known as the 26 item Eating Attitudes Test (EAT-26). The EAT-26 has been validated to show a high level of concurrent validity and a consistent predictive validity across independent samples and controls; the test also demonstrates a high degree of internal reliability (Garner & Garfinkel, 1982).

The scale developers reported strong internal consistency ($r = .90$; Garner et al., 1982), and subsequent research has found the EAT-26 highly accurate in classifying eating-disordered and non eating-disordered individuals (Gross, Rosen, Leitenberg, & Willmuth, 1986).

This study used the 26-item self-report version, in which the frequencies of attitudes and beliefs are rated using a 6-point scale: always, usually, often, sometimes, rarely, and never. The EAT-26 consists of 3 subscales (i.e., Dieting, Bulimia and Food Preoccupation, and Oral Control). Items are assigned to the three subscales as follows: Dieting items are: 1, 6, 7, 10, 11, 12, 14, 16, 17, 22, 23, 24, and 25; Bulimia and Food Preoccupation items are: 3, 4, 9, 18, 21, and 26; Oral Control items are: 2, 5, 8, 13, 15, 19, and 20 (Garner & Garfinkel, 1982). Responses for each item are from 0 to 3, with a score of 3 given to the responses furthest in the "symptomatic" direction ("always" or "never," depending on whether the item is keyed in the positive or negative direction (item 25 is the only negatively input item on the EAT-26); a score of 2 follows the immediately adjacent response; a score of 1 for the next adjacent response; and a score of 0 is given to the three responses furthest in the "asymptomatic" direction.

Item scores contribute to only one subscale score. Subscale scores are calculated by summing all item scores for that particular subscale. The total EAT-26 score is the sum of all three subscales.

The rationale for the 0-3 scoring system (instead of a 1-6 scoring system) is theoretical, rather than experimental. It is based on the assumption that item scaling on the EAT-26 is continuous only for the responses weighted 1-3 (Garner & Garfinkel, 1982). Therefore, responses in the "nonsymptomatic" direction should not contribute to a total subscale score reflecting psychopathology. With a 1-6 scoring system, it is possible for two responses in the "nonsymptomatic" direction to receive the same experimental weight (e.g., 3 + 3 = 6) as one extreme response in the "symptomatic" direction.

The Media Influence Scale (MIS), a 10-item instrument designed for a pilot study by Polce-Lynch et al. (1994), examined how adolescents' thoughts and feelings about their physical appearance may be influenced by advertisements, movies, and television. A sample item from the MIS is, "When I compare myself to movie stars on TV or in the movies, I feel happy with the way I look." A Likert-type response is required, ranging from 1 (always) to 4 (never). Scoring is done by summing scores across the scale. A high total score, ranging from 10 to 40, indicates that the media influences the respondent's attitude about his or her physical appearance. A Cronbach alpha of .87 was found in

the pilot study of 66 adolescents (Polce-Lynch et al.). Further research has found that this scale has acceptable internal consistency (α ¼ .94), test-retest reliability (r ¼ .90), and predictive validity (Stice, 2001).

Using these scales was worthwhile because it enabled the researcher to obtain results on generally accepted measurement scales and because it made the research results much more applicable to the body of knowledge, about this type of advertising and its effects.

It was hoped that the findings would explore television's effects, not just on changing moods or shifting attitudes, but also on short-term changes in self-perception. The researcher's belief was that, like body image, a viewer's self-schema is more elastic than commonly thought, and that television is indeed a "technology of the self" (Myer & Biocca, 1992).

CHAPTER IV

Procedure

Required Protocol

The researcher requested and obtained permission from the Office for Human Research Protection to use human subjects for conducting the experiments. A human subject application was filled out and approved before the experiments were carried out. Further, the researcher obtained permission from professors of two Journalism and Mass Communication classes to conduct the experiment in one of their respective classes. This involved sending a letter that explained the reasons for the study and its aims as well as details of the measures that would be used.

Before the experiments were carried out on each group (experimental and control), the researcher reminded the participants that all responses would be strictly confidential and could not be identified with an individual in any way. This was done both to encourage the students to be honest when answering the questions and to fulfill the informed consent requirements. All participants were told that participation was not mandatory, but none withdrew, making a 100% response rate.

Background information was gathered on a confidential information form, which included age, height, and present weight. SPSS version 11.5 for Windows was used for all statistical analyses.

Experimental Treatment: Visual Stimulus

The experimental group (n_1 = 30) was exposed to the ideal-image commercial tape, consisting of 26 commercials featuring female models who "epitomized societal ideals of thinness and attractiveness" (Thompson, Heinberg, Altabe, & Tanteleff, 1999, p. 331). The control group (n_2 = 30) watched 27 advertisements that were deemed to be similarly engaging, but whose main focus was not on female appearance. Each tape was approximately 14.5 minutes in duration. The two sets of commercials had been carefully matched for their positive appeal, to ensure that both tapes were of equal interest to the viewers.

Questionnaires

Immediately following the visual stimuli, subjects in each group were asked to complete a set of three questionnaires. The differences between self-esteem, media

influence, and eating disorder levels were analyzed by using *t* tests.

Null Hypothesis

The null hypothesis states that there is no statistically significant difference in the self-esteem or media influence levels of women who watch ideal-body commercials as compared with those who do not watch these commercials. It further states that women who watch ideal-body advertising are at no higher risk of developing eating disorders then their counterparts who have not watched these commercials.

Initial Analyses

Preliminary analyses revealed no significant differences in the mean age, height, or weight of the two groups of participants (Table 2). The age of the participants (n_1 = 30, n_2 = 30) ranged from 18 to 24 years; the mean age was 20.42 years (*SD* = 1.92). The mean height of the two groups was 5 feet 5 inches (*SD* = 0.21). The mean body weight of the two groups was 128.27 pounds (*SD* = 14.5).

Table 2

Clinical Characteristics

		Age	Height	Weight
Experimental Group	*M*	20.37	5.51	129.10
	n_1	30	30	30
	SD	1.79	.19	15.24
Control Group	*M*	20.47	5.49	127.43
	n_2	30	30	30
	SD	2.06	.23	13.92
Total	*M*	20.42	5.50	128.27
	N	60	60	60
	SD	1.95	.21	14.49

Calculating Body Mass Index

Body Mass Index (BMI) was calculated for both groups (Table 3) to ensure that the weight range of subjects in both groups was in the normal range for their age and gender.

BMI is a tool for indicating weight status in adults. BMI can be calculated using pounds and inches with this equation:

$$BMI = \left(\frac{\text{Weight in pounds}}{(\text{Height in inches}) \times (\text{Height in inches})} \right) \times 703$$

(Center for Disease Control and Prevention [CDC], 2004).

Table 3

Body Mass Index Levels

	M	*N*	*SD*
Experimental Group	21.36	30	2.25
Control Group	21.24	30	1.71
Total	21.30	60	1.98

For the entire sample (N = 60; n_1 = 30, n_2 = 30), the mean BMI was 21.30 (SD = 1.98). Mean BMI for n_1 was 21.36 (SD = 2.25), while N_2 had a mean BMI of 21.24 (SD = 1.71). According to the table of norms (Table 3) for older adolescents and young adults (CDC, 2004), the mean BMI for the women in this sample was within the normal range for their age and sex.

Table 4

Table of Norms

BMI	19	20	21	22	23	24	25	26	27	28	29	30
Height					Weight (in pounds)							
4'10"	91	96	100	105	110	115	119	124	129	134	138	143
4'11"	91	99	104	109	114	119	124	128	133	138	143	148
5'	97	102	107	112	118	123	128	133	138	143	148	153
5'1"	100	106	111	116	122	127	132	137	143	148	153	158
5'2"	104	109	115	120	126	131	136	142	147	153	158	164
5'3"	107	113	118	124	130	135	141	146	152	158	163	169
5'4"	110	116	122	128	134	140	145	151	157	163	169	174
5'5"	114	120	126	132	138	144	150	156	162	168	174	180
5'6"	118	124	130	136	142	148	155	161	167	173	179	186
5'7"	121	127	134	140	146	153	159	166	172	178	185	191
5'8"	125	131	138	144	151	158	164	171	177	184	190	197
5'9"	128	135	142	149	155	162	169	176	182	189	196	203
5'10"	132	139	146	153	160	167	174	181	188	195	202	209
5'11"	136	143	150	157	165	172	179	186	193	200	208	215
6'	140	147	154	162	169	177	184	191	199	106	213	221

Descriptive Statistics

Separate independent *t* tests were used to compare scores to determine the difference in self-esteem levels between the experimental (n_1) and control (n_2) groups; to note the degree of discrepancy in media influence on both groups; and to determine the level of risk each group faced for acquiring eating disorders.

Self-Esteem Levels

Independent sample *t* tests were conducted to see whether there was a difference in the self-esteem levels of women from the experimental group and those from the control group. The results (Table 5) indicate that there was no statistically significant difference between the self-esteem levels of the two groups in question. The researcher was unable to reject the null hypothesis, as the *t* test resulted in a level of significance greater then .05.

Table 5

Differences in RSI Levels

Group Statistics					
		N	*M*	*SD*	*SEM*
RSI Score	Experimental Group	30	27.03	5.37	.98
	Control Group	30	28.93	4.12	.75

Independent Sample Test									
	Levenes's test for Equality of Variances		t test for Equality of Means						
								95% Confidence Interval of Difference	
	F	Sig.	*t*	df	Sig. (2-tailed)	*M* Diff.	*SE* Diff.	Lower	Upper
RSI Score									
Equal Variances assumed	3.59	.06	-1.54	58	.13	-1.90	1.24	-4.37	.57
Equal Variances not assumed			-1.54	54.37	.13	-1.90	1.24	-4.37	.57

Media Influence Scale

Results (Table 6) illustrate that a significant difference exists between the means of media influence on women in the experimental group and those in the control group $t(11) = 2.06$, $p = .044$.

Table 6

Differences in MIS Levels

Group Statistics					
		N	*M*	*SD*	*SEM*
MIS Score	Experimental Group	30	27.70	3.923	.716
	Control Group	30	25.73	3.463	.632

Independent Sample Test									
	Levenes's test for Equality of Variances		*t* test for Equality of Means						
								95% Confidence Interval of Difference	
	F	Sig.	*t*	df	Sig. (2-tailed)	*M* Diff.	*SE* Diff.	Lower	Upper
MIS Score									
Equal Variances assumed	.02	.88	2.06	58	.04	1.97	.95	.05	3.88
Equal Variances not assumed			2.06	57.12	.04	1.97	.95	.05	3.88

The Media Influence Scale (MIS) implies that media relate to physical appearance. The mean score was 27.70 and 25.73, respectively. These results confirmed that participant's in the experimental group were more influenced by the media.

Eating Attitude Test

In the Bulimia and Food Preoccupation subscale (Table 7), the experimental group showed a significant increase in bulimic reactions and a fixation on food, compared with the control group ($t(43) = 2.03$, $p = .04$).

However, the EAT-26 scale is looked at as a combination of all three of its sub scales: Dieting, Bulimia & Food Preoccupation, and Oral Control. Therefore, there appeared to be no significant difference in the means of the experimental and control group, the null hypothesis could not be disproved (sig. = 0.89).

Table 7

Differences in Eating Attitude Levels

Group Statistics

Subscales		*N*	*M*	*SD*	*SEM*
Dieting	Experimental Group	30	10.47	6.38	1.16
	Control Group	30	11.20	7.26	1.33
Bulimia & Food Preoccupation	Experimental Group	30	1.60	2.175	.40
	Control Group	30	.70	1.088	.20
Oral Control	Experimental Group	30	2.80	2.52	.46
	Control Group	30	2.50	2.87	.53
Total EAT-26 Score	Experimental Group	30	14.73	8.34	1.52
	Control Group	30	14.40	10.10	1.85

Independent Sample Test

	Levenes's test for Equality of Variances		*t* test for Equality of Means						
								95% Confidence Interval of Difference	
	F	Sig.	t	df	Sig. (2-Tailed)	*M* Diff.	*SE* Diff.	Lower	Upper
Dieting Score									
Equal Variances assumed	2.29	.14	-.42	58	.68	-.73	1.76	-4.27	2.80
Equal Variances not assumed			-.42	57.05	.68	-.73	1.76	-4.27	2.80

(table continues)

Table 7 (cont.)

Differences in Eating Attitude Levels

	Independent Sample Test								
	Levenes's test for Equality of Variances		*t* test for Equality of Means						
								95% Confidence Interval of Difference	
	F	Sig.	t	df	Sig. (2-Tailed)	*M* Diff.	*SE* Diff.	Lower	Upper
Bulimic & Food Preoccupation Score									
Equal Variances assumed	5.40	.24	1.85	58	.07	.77	.42	-.06	1.58
Equal Variances not assumed			1.85	44.83	.07	.77	.42	-.07	1.60
Oral Control Score									
Equal Variances assumed	2.29	.14	.43	58	.67	.30	.70	-1.10	1.70
Equal Variances not assumed			.43	57.05	.67	.30	.70	-1.10	1.70

(table continues)

Table 7 (cont.)

Differences in Eating Attitude Levels

	Independent Sample Test								
	Levenes's test for Equality of Variances		*t* test for Equality of Means						
								95% Confidence Interval of Difference	
	F	Sig.	*t*	df	Sig. (2-Tailed)	*M* Diff.	*SE* Diff.	Lower	Upper
Total EAT-26 Score									
Equal Variances assumed	4.54	.04	1.14	58	.89	.33	2.39	-4.46	5.12
Equal Variances not assumed			1.14	55.98	.89	.33	2.39	-4.46	5.12

CHAPTER V

Results

Self-Esteem Levels

This study draws attention to the advertising industry's stringent body rules about what the ideal female looks like. The anxiety that girls and women experience because they feel unattractive is one of the most pervasive and damaging consequences of advertising. With few exceptions, one female body type is presented in the media and in advertisements: tall and slender, 15% below normal weight. A woman this size would meet the criteria for anorexia (Belkaoui & Belkaoui, 1976).

One assumption of this study was that women who were unable to reach the standard of ideal beauty would feel a sense of failure, shame, and guilt. It was hypothesized that a significant difference in the self-esteem level of women could be calculated by carrying out a study to measure the discrepancies between two groups, one exposed to ideal-body advertisements and one exposed to non-appearance advertisements.

The results of this study demonstrated that there was no significant difference between the group of women who were exposed to ideal image advertising and the group

exposed to non-appearance advertising. The mean level of self-esteem for the experimental group (27.03) was too close to the mean of the control group (28.93). Therefore, the researcher was unable to reject the null hypothesis, based on the *t* test result of a .13 level of significance.

Media Influence

Media marketing is based on wants. By focusing on people's desires, the media are able to market products and ideas that set consumers up for failure and frustration. People then try to become successful and resolve their frustrations by making purchases (Downs & Harrison, 1985). Television commercials influence female self-concept and achievement aspirations, and television often depicts situations in which thin people prosper and large people are ridiculed (Silverstein et al., 1986).

Various types of media promote an extreme ideal-body image, creating body dissatisfaction that can lead to eating disorders. But even though the mass media are powerfully influential, not everyone is affected in the same way. This thesis focused on the level of media influence on women in the experimental group versus those in the control group.

Results from the Media Influence Scale demonstrated a significant difference between the women who were exposed to ideal-image advertisements and the women exposed to non-appearance advertising. The study found that the mean level of media influence on the experimental group (27.70) was significantly higher than the mean level of media influence on the control group (25.73). A .04 level of significance was calculated, with a significant *t* value of 2.06.

Eating Attitudes

The ideal-body size epitomized by models in prevalent television advertising has become unrealistically thin: models' BMI's appear to be on the borderline of anorexia (Garner & Garfinkel, 1979).

This thesis hypothesized that women who viewed thin-mage advertising would have more of a fixation on thinness and have anorexic-bulimic attitudes. The EAT-26, a three-part scale that identifies eating disorder levels, was used in this study. A subject is said to be leaning toward disordered eating if his or her EAT score is 20 or more.

However, no significant difference in eating disorder levels was found in this study. The mean score of the experimental group (14.73) was almost the same as the mean

of the control group (14.40). The null hypothesis therefore could not be rejected, with a .89 level of significance.

CHAPTER VI

Conclusion

A limitation of this study was that the experimental manipulation of media exposure could not occur within the context of television viewing. In real life, commercials are interspersed with programs, rather than appearing in one block, and viewers are able to choose which programs they view.

Another drawback the research faced was the fact that approximately 42% of the subject pool was advertising majors. The control group was approximately 10% advertising majors, while the experimental group was approximate 32% advertising majors. Because of this, a relatively high percentage of subjects could have been sensitive to the visual stimuli and responded with preconceived notions of what they knew these advertisements symbolized.

The present study demonstrates that one brief exposure (approximately 14.5 minutes) to the thin-female ideal, consisting of 26 or 27 ads, does not result in increased levels of body dissatisfaction or eating disorders. The researcher concluded that no striking dissimilarity could be found between the self-esteem levels of the women exposed to ideal-body advertising and women exposed to non-

ideal image advertising. Moreover, the advertising in both stereotypical and non-stereotypical commercials did not relate to a heightened level of eating-disordered attitude.

Except for the difference between the experimental group and the control group regarding level of media influence, the hypothesis—that women who view thin image advertising will have a reduced sense of self-esteem, a heightened preoccupation with thinness, and stronger anorexic-bulimic attitudes—was rejected.

However, it must be noted that such exposure is far less than that experienced in just one night of typical TV viewing. Usually, approximately 30 commercials are screened each and every hour of the evening, many of which show images of the thin ideal (Kilbourne, 1999). Further, the difference obtained in media influence levels suggests that television advertising does indeed manipulate the minds of viewers. Early intervention work is now focusing on strategies to prevent girls and young women's internalization of the values presented in TV advertisements (Smolak, Levine, & Thompson, 2001).

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